

STATEMENT OF DR PHAIBUL JITPRPHAI
ON ORGAN TRAFFICKING BY THE CHINESE COMMUNIST
GOVERNMENT
before the
INTERNATIONAL RELATIONS COMMITTEE AND
GOVERNMENT REFORM & OVERSIGHT COMMITTEE
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In our highly technological world, the efficiency of organ transplants has developed considerably. Medical machinery and immunosuppression medication promote the survival of patients and increase their chances of a normal life. Most of the patients dying **from** kidney **failure** and other types of organ **failures** can be saved with organ transplants.

The only downfall to this miracle of modern medicine is the extent of the waiting lists. For kidneys, the list holds more than 35,000 names in United States and over 2,500 in Thailand.

In most of Asia, organ donations are stalled by cultural beliefs. Whether they are Chinese, Malaysian, Thai or Indonesian, most Asians believe that their bodies have to be buried whole or they will not be complete in the next stage of their lives. This obviously hinders the chances of getting organs from accidental death, as doctors can not obtain consent **from** anyone.

The donation **from** brain-dead donor is thus relatively low. In Thailand, there are on average 100 donors a year, giving 200 kidneys to use to save people. Every year, more than 200 new people put their names down on the waiting list.

The large majority of the countries around the world have an organ shortage. This is especially true in countries that have tight regulations around organ donation. In Thailand, the law only permits close relatives such as siblings, parents and children to make a living donation. Even husbands and wives have certain extra regulations. This law follows the basic principles that doctors have acquired while training in the United States. However, since the Thai government ratified this restrictive law in 1992, the chances of receiving an organ have become very **slim**. The demand for organs has by consequence become extremely high.

Due to the above reasons, the market for organs has boomed. As obtaining an organ from an accidental death is very limited, patients have three options left. The **first** is obviously the close family.

The second option is to buy an organ **from** a live donor. In order to prevent live individuals from selling their own organs, many countries including Thailand have established laws to restrict the retail of organs **from** live donors. In any case, live donors would not be extremely numerous because of the cultural beliefs that most Asians hold.

The last option is to obtain an organ from a condemned prisoner who is willing to donate his or her organs. Executed prisoners would be a helpful source. However, in Thailand, this is not an option because our regulations specify that a criminal has to be shot through the heart. This process is considered to be more humane than the shooting in the brain, which can sometimes miss. Their organs can not be used because cardiac arrest causes a circulation **failure**. China, on the other hand, has changed their regulations on the execution of their prisoners to shooting through the brain in order to keep all organs intact.

Thai patients have been going to China to get transplants for the past seven years. To my knowledge, there are at least 40 patients every year that get kidney transplants. All of them are told that the organs come from executed prisoners. Of course they don't know why these people are being executed. In reality, most of the patients are aware that many Chinese prisoners are not criminals by our standards. **Of course** they know that the prisoners did not really give their consent. But how can they push away the opportunity to live.

Many doctors in Thailand were trained in the United States. Those doctors seem to have higher ethical values and they do condemn the Chinese practices. These doctors do exhort their patients not to go through with the operation in China. But when a patient is dying **from** kidney failure, you can't stop him or her **from** going.

The main problem is the organized market that has sprung around this desperate need for organs. People that we call 'brokers' or 'travel agents' make a profit on the **illness** of these individuals and the death of prisoners. My patients tell me how it happens and I have even met brokers. These individuals find the lists of patients waiting for organs. They contact them and inform them that in a certain amount of time, they will have 20 B+ types, 10 O's, 25 **AB's** and so on. They then ask for 30 to \$40,000. This money has to be paid in cash, in Thailand. The brokers will then take care of hotel accommodation, hospital rooms, the operation and the organ itself. These are the people who make the major profit. The doctors probably get "**gifts**" but they are not substantially paid.

This organized market is really what poses the main problems. It is because of this that abuses occur. It is because of these brokers that certain executions are postponed because a patient has not arrived. It is because of these brokers that important clients get

operation tents right on the field. It is because of these brokers that the 100,000 Chinese people who are also waiting for kidney transplants will never get them

I do not know who these brokers are. Nurses, hospital officials, government officials, no matter what, they need to be stopped.

I believe that China should use the organs of its dead criminals **if it** can save lives. ~~But it should~~ do so without trampling all over human rights and all medical ethics, it ~~needs to change~~ a few of its policies.

1. The donation of organs has to be **voluntary** and the family has to be informed of this donation and they have to be consenting. The Chinese consider that when you are a prisoner, you no longer have rights. This is an **affront** to human rights.
2. China has to put an end to the organ traffic taking place within its territory. The government has to control and arrest the brokers who make the real profit on the transactions.
3. Organ allocation has to be ethically controlled. The organs should be allocated to patients who have been waiting for years and not only to those patients with money to spare.